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REISSUE PATENT APPLICATION TRANSMITTAL

Address to: Assistant Commissioner for Patents Box: Patent Application Washington, DC 20231	<i>Attorney Docket No.</i>	P55057RE
	<i>First Named Inventor</i>	YEO-CHANG YOON
	<i>Original Patent Number</i>	6,141,627
	<i>Original Patent Issue Date (Month/Day/Year)</i>	October 31, 2000
	<i>Express Mail Label No.</i>	

1. ☒ APPLICATION FOR REISSUE OF: (check applicable box) ☒ Utility Patent ☐ Design Patent ☐ Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)	ACCOMPANYING APPLICATION PARTS
1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/SB/56) <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification and Claims in double column copy of patent <i>(amended, if appropriate)</i> 4. <input checked="" type="checkbox"/> Drawing(s) <i>(proposed amendments, if appropriate)</i> 5. <input checked="" type="checkbox"/> Reissue Oath/Declaration (executed) <i>(37 C.F.R. §1.175)(PTO/SB/51 or 52)</i> 6. <input checked="" type="checkbox"/> Original U.S. Patent currently assigned? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If Yes, check applicable box(es))</i> <input checked="" type="checkbox"/> Written Consent of all Assignees (PTO/SB/53) -combined in Declaration <input checked="" type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (PTO/SB/96) -combined in Declaration	7. <input checked="" type="checkbox"/> Statement of status/support for all changes to the claims. See 37 CFR 1.173(c). -combined in Declaration 8. <input checked="" type="checkbox"/> Original U.S. patent for surrender <input type="checkbox"/> Ribboned Original Patent Grant <input checked="" type="checkbox"/> Statement of Loss (PTO/SB/55)- -combined in Declaration 9. <input type="checkbox"/> Foreign Priority Claim (35 U.S.C. 119) <i>(if applicable)</i> 10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS) PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> English Translation of Reissue Oath/Declaration <i>(if applicable)</i> 12. <input checked="" type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 14. <input checked="" type="checkbox"/> Other: <u>Reissue Application Fee Transmittal Form</u> <u>Check #40782 for \$2,666.00</u>

15. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label		008-439 <i>(Insert Customer No. Or Attach bar code label here)</i>		or <input type="checkbox"/> Correspondence address below	
Name	ROBERT E. BUSHNELL and Law Firm				
Address	1522 K Street, N.W., Suite 300				
City	Washington	State	D.C.	Zip Code	20005-1202
Country	U.S.A.	Telephone	(202) 408-9040	Fax	(202) 289-7100

NAME (Print/Type)	Robert E. Bushnell	Registration No. (Attorney Agent)	27,774
Signature		Date	20 December 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent & Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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REISSUE APPLICATION FEE TRANSMITTAL FORM					Docket Number (Optional) P55057RE			
Claims as Filed - Part 1								
Claims in Patent	For	Number filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee		Rate	Fee
(A) 12	Total Claims (37 CFR 1.16(j))	(B) 57	**** 37 =	×\$ ____ =		or	×\$ <u>18</u> =	666.00
(C) 3	Independent Claims (37 CFR 1.16(i))	(D) 18	* 15 =	×\$ ____ =			×\$ <u>84</u> =	1,260.00
Basic Fee (37 CFR 1.16(h))					\$ ____	OR		
Total Filing Fee					\$			
Claims as Filed - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee		Rate
Total Claims (37 CFR 1.16(j))	***	MINUS	**	*	×\$ ____ =	or	×\$ ____ =	
Independent (37 CFR 1.16(i))	***	MINUS	*****	0	×\$ ____ =		×\$ ____ =	
Total Additional Fee					\$	OR		
<p>* If the entity in (D) is less than the entity in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B-A); if "A" is 20 or less, use (B-20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>02-4943</u>.</p> <p><input checked="" type="checkbox"/> A check (#40782) in the amount of \$ <u>2,666.00</u> to cover the filing/additional fee is enclosed.</p>								
<u>20 December 2001</u> Date				_____ Signature of Applicant, Attorney or Agent of Record				
				<u>Robert E. Bushnell</u> Typed or printed name				

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FEE TRANSMITTAL

Patent fees are subject to annual revision.

Complete If Known

Original Patent No.	6,141,627 (31 October 2000)
Filing Date	20 December 2001
First Named Inventor	Yeo-Chang YOON
Examiner Name	to be assigned
Group/Art Unit	to be assigned
Attorney Docket No.	P55057RE

TOTAL AMOUNT OF PAYMENT

(\$)2,666.00**METHOD OF PAYMENT (check one)**1. ☐

The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number: 02-4943

Deposit Account Number: _____

☐ Charge Any Additional Fee Required Under 37 C.F.R. §1.16 and 1.17.☐ Applicant claims small entity status. See 37 CFR 1.27**2. Payment Enclosed:**

(CHECK #40782)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	\$
106	330	206	165	Design filing fee	\$
107	510	207	255	Plant filing fee	\$
108	740	208	370	Reissue filing fee	\$740.00
114	160	214	80	Provisional filing fee	\$

SUBTOTAL (1) (\$)740.00**2. EXTRA CLAIM FEES**

			Extra Claims	Fee from below	Fee Paid
Total claims	57	-20** =	37	x 18	= 666.00
Independent Claims	18	-3** =	15	x 84	= 1260.00

Multiple Dependent

=

** or number previously paid, if greater; For Reissues, see below

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)1,926.00**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge-late filing fee or oath	\$
127	50	227	25	Surcharge-late provisional filing fee or cover sheet	\$
139	130	139	130	Non-English specification	\$
147	2,520	147	2,520	For filing a request for reexamination	\$
112	920	112	920	Requesting publication of SIR prior to Examiner action	\$
113	1,840	113	1,840	Requesting publication of SIR after Examiner action	\$
115	110	215	55	Extension for reply within first month	\$
116	400	216	200	Extension for reply within second month	\$
117	920	217	460	Extension for reply within third month	\$
118	1,440	218	720	Extension for reply within fourth month	\$
128	1,960	228	980	Extension for reply within fifth month	\$
119	320	219	160	Notice of Appeal	\$
120	320	220	160	Filing a brief in support of an appeal	\$
121	280	221	140	Request for oral hearing	\$
138	1,510	138	1,510	Petition to institute a public use proceeding	\$
140	110	240	55	Petition to revive - unavoidable	\$
141	1,280	241	640	Petition to revive - unintentional	\$
142	1,280	242	640	Utility issue fee (or reissue)	\$
143	460	243	230	Design issue fee	\$
144	620	244	310	Plant issue fee	\$
122	130	122	130	Petitions to the Commissioner	\$
123	50	123	50	Processing fee for provisional applications	\$
126	180	126	180	Submission of Information Disclosure Statement	\$
581	40	581	40	Recording each patent assignment per property (Times number of properties)	\$
146	740	246	370	Filing a submission after final rejection (37 C.F.R. §1.129(a))	\$
149	740	249	370	For each additional invention to be examined (37 C.F.R. §1.129(b))	\$
Other Fee (specify) _____					\$
Other Fee (specify) _____					\$

** Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$0.00**SUBMITTED BY****Complete (if applicable)**

Typed or Printed Name

Robert E. Bushnell, Esq.

Reg. Number

27,774

Signature

Date

20 December 2001

Deposit Account
User ID

REB/kf

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